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21553 7590 02/28/2008

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Karin Smith	(Depositor's name)
<i>Karin Smith</i>	(Signature)
May 19, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/564,209 01/09/2006 Arndt Glacsser

TITLE OF INVENTION: METHOD AND DEVICE FOR MILLING FREEFORM SURFACES

4932/PCT 05/20/2008 MGEBREM2 00000026-50050X 10564289 2556

01 FC:1501 1440.00-DA
02 FC:1504 380.00-DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1440 \$300 \$0 \$1740 05/28/2008

EXAMINER	ART. UNIT	CLASS-SUBCLASS	05/20/2008 MGEBREM2 00000027 10564289
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JARRETT, RYAN A 2121 700-187000

01 FC:1501 1440.00 OP

380.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> W. F. Fasse
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<input type="checkbox"/> W. G. Fasse
	<input type="checkbox"/> 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

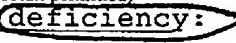
(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MTU Aero Engines GmbH

Muenchen, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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<input checked="" type="checkbox"/> Issue Fee	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted)	<input type="checkbox"/> A check is enclosed.
<input type="checkbox"/> Advance Order - # of Copies <i>deficiency:</i> 	<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.
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Authorized Signature



Date May 19, 2008

Typed or printed name Walter F. Fasse

Registration No. 36132

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